

## DEPARTMENT OF ENVIRONMENTAL QUALITY - WATER BUREAU WINTER PLAN FOR LAND APPLICATION OF SEPTAGE WASTE

This information is required by authority of Part 117, 1994 PA 451, as amended. Failure to submit this information is a felony.

Business Name:	Septage Licer	nse #:Cropping Year:
Land Site Address:		Site I.D #:
City: Twp:	County:	Section:
Number of Acres for Use During Winter Months:	Site Plan (Attach plan showing  Yes No	field to be used in winter):
Method of Septage Waste Applicati	ion:  Injection* (Recommende	d)
Percent of Slope: Surface (Maximum Injection (Maximum)	<u> </u>	☐ 2-6% ☐ 2-6% ☐ 6.1 - 12%
Maximum Application Rate* ( gallor	ns per acre during winter months	e): 10,000 gallons
Depth of Injection/Incorporation:	0 - 8 inches	☐ 0 - 12 inches
Dominant Soil Class (Within Depth	of Injection or Incorporation) e.g.	. sandy loam:
Land Management Practice that wil	II Follow after Winter application a	
Pathogen Reduction and Vector Att	traction Reduction Method: (Checction Incorporation with	· · · · ·
Equipment to be used for injection	or proper soil incorporation (Sun	face application <b>):</b>
	rip (winter crop)	
Other Winter Disposal Plan: [ (Check all that apply)	☐ Wastewater Treatment Plant	☐ Septage Waste Storage Facility
Note: * Surface applied septage waste incorporated within 6 hours or 48 hours.	. •	soil surface after injection must be
Isolation Distances: Make sure tha	t isolation distances are met with	regard to the winter disposal area.
Name of Septage Business Owner (P	rint):	
Signature of Septage Business Owne	er:	Date:
Reminder: Effective October 12, 20 permitted. Must stop se	06, land application of septage weptage weptage waste application when so	
Winter Period: December 21 – March 21		
	DEQ OFFICIAL USE  ☐ Approved ☐ Not Appr	roved
DEQ Signature:	nments: (Use additional sheet, if ne	Date:
Con	imients: (Ose additional sheet, if he	ecessary)